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| Fill in this information to identify your case: | | |
|---|-------------------------------|-----------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF ILLINOIS | | |
| Case number (if known) | Chapter you are filing under: | |
| | Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | ☐ Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | rt 1: | Identify Yourself | | |
|----|---|--|--|---|
| | | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | You | r full name | | |
| | your pictu exar licer Brin- iden | e the name that is on a government-issued ure identification (for mple, your driver's use or passport). If your picture tification to your ting with the trustee. | Raymond First name A. Middle name Habel Last name and Suffix (Sr., Jr., II, III) | First name Middle name Last name and Suffix (Sr., Jr., II, III) |
| 2. | use Inclu | other names you have d in the last 8 years ude your married or den names. | | |
| 3. | you num Indi | y the last 4 digits of r Social Security aber or federal vidual Taxpayer utification number | xxx-xx-3354 | |

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Case number (if known)

Debtor 1 Raymond A. Habel

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | | | |
|--|--|---|--|--|--|--|--|
| 4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | | ■ I have not used any business name or EINs. Business name(s) | - | ☐ I have not used any business name or EINs. Business name(s) | | | |
| | | EINS | | EINs | | | |
| 5. | Where you live | 925 Bryn Mawr Ave. | | If Debtor 2 lives at a different address: | | | |
| | | Roselle, IL 60172 Number, Street, City, State & ZIP Code | _ | Number, Street, City, State & ZIP Code | | | |
| | | DuPage | _ | | | | |
| | | County | | County | | | |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. | | | | |
| | | Number, P.O. Box, Street, City, State & ZIP Code | _ | Number, P.O. Box, Street, City, State & ZIP Code | | | |
| 6. | Why you are choosing this district to file for | Check one: | | Check one: | | | |
| | bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | | | |
| | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | | | |
| | | | _ | | | | |

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Case number (if known)

Debtor 1 Raymond A. Habel

Part 2: Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for No. bankruptcy within the last 8 years? ☐ Yes. District When Case number When District Case number When District Case number 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Debtor Relationship to you When Case number, if known District Debtor Relationship to you When District Case number, if known 11. Do you rent your Go to line 12. No. residence? Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? ☐ Yes. No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this

bankruptcy petition.

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| Debtor 1 | Raymond A. Habel | Document | Page 4 of 46 Case number (| if known) |
|----------|------------------|----------|----------------------------|-----------|
| | | | | |

| Part | Report About Any Bu | sinesses ` | You Own | as a Sole Propriet | tor | | | | |
|---|---|--------------------------------------|--|--|---|--|--|--|--|
| 12. | Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to Part 4. | | | | | | |
| | | ☐ Yes. Name and location of business | | | | | | | |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | Name | e of business, if any | | | | | |
| | If you have more than one sole proprietorship, use a separate sheet and attach | | Numb | er, Street, City, Stat | e & ZIP Code | | | | |
| | it to this petition. | | Chec | k the appropriate bo | x to describe your business: | | | | |
| | | | | Health Care Busin | ness (as defined in 11 U.S.C. § 101(27A)) | | | | |
| | | | | Single Asset Real | Estate (as defined in 11 U.S.C. § 101(51B)) | | | | |
| | | | | Stockbroker (as de | efined in 11 U.S.C. § 101(53A)) | | | | |
| | | | | Commodity Broke | r (as defined in 11 U.S.C. § 101(6)) | | | | |
| | | | | None of the above | | | | | |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? | deadlines operation | If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B). | | | | | | |
| | For a definition of small | ■ No. | I am r | I am not filing under Chapter 11. | | | | | |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | | I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. | | | | | |
| | | ☐ Yes. | I am f | I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. | | | | | |
| Part | A: Report if You Own or | Have Any | Hazardo | us Property or Any | y Property That Needs Immediate Attention | | | | |
| | Do you own or have any | | Tiazaiac | nus i roperty or Ang | y Froperty That Needs Immediate Attention | | | | |
| | property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? | ■ No. □ Yes. | What is | the hazard? | | | | | |
| | Or do you own any property that needs immediate attention? | | | liate attention is why is it needed? | | | | | |
| For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | | Where is | s the property? | Number, Street, City, State & Zip Code | | | | |
| | | | | | riumber, otreet, oity, otate a zip odue | | | | |

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Debtor 1 Raymond A. Habel

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Document Page 6 of 46 Case number (if known) Debtor 1 Raymond A. Habel Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under □ No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? **\$100,001 - \$500,000** □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,000,001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Raymond A. Habel Signature of Debtor 2 Raymond A. Habel

Executed on

Signature of Debtor 1

Executed on December 13, 2016

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Debtor 1 Raymond A. Habel Document Page 7 of 46 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Gregory J. Martucci | Date | December 13, 2016 | | | | |
|---|---------------|----------------------|--|--|--|--|
| Signature of Attorney for Debtor | | MM / DD / YYYY | | | | |
| Gregory J. Martucci Printed name | | | | | | |
| Law Office of Gregory J. Martucci, P.C. | | | | | | |
| 203 E. Irving Park Rd. Roselle, IL 60172 | | | | | | |
| Number, Street, City, State & ZIP Code | | | | | | |
| Contact phone (630) 980-8333 | Email address | greg@martuccilaw.com | | | | |
| 6185842 | | | | | | |
| Bar number & State | | | | | | |

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| | Docume | ent Page 8 of 4 | 16 | |
|-------------------------|-------------------------------|---|---|---|
| nation to identify your | case: | | | |
| Raymond A. Habe | el | | | |
| First Name | Middle Name | Last Name | | |
| | | | | |
| First Name | Middle Name | Last Name | | |
| nkruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| | | | | D Obert William |
| | | | | ☐ Check if this is an amended filing |
| | Raymond A. Habe First Name | Raymond A. Habel First Name Middle Name First Name Middle Name | Raymond A. Habel First Name Middle Name Last Name First Name Middle Name Last Name | Raymond A. Habel First Name Middle Name Last Name First Name Middle Name Last Name |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| | | Your a | ssets of what you own |
|-----|--|-------------|----------------------------------|
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 217,500.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 11,082.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 228,582.00 |
| Pai | t 2: Summarize Your Liabilities | | |
| | | | i abilities It you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 253,985.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 28,240.00 |
| | Your total liabilities | \$ | 282,225.00 |
| Paı | t 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 2,890.43 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 2,813.78 |
| Pai | t 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | ır other sc | hedules. |
| | ■ Yes What kind of debt do you have? | | |

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Case number (if known) Debtor 1 Raymond A. Habel

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

2,890.43 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total cl | aim |
|--|----------|------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

| | Ca | ase 16-39204 | Doc 1 | Filed 12 | 2/13/16 | Entered 12/13/: | 16 15:15:34 | Des | c Main | |
|---------------------|---|---|---|-------------------------------|---|---|--|-------------|-------------------------------------|-------|
| Fill | in this infor | mation to identify | your case and th | | 110.3.11 | 1 71.11. 117 (7) 4 (7 | | | | |
| Deb | otor 1 | Raymond A. | Habel | | | | | | | |
| | | First Name | | e Name | | Last Name | | | | |
| | otor 2 use, if filing) | First Name | Middle | e Name | | Last Name | | | | |
| Uni | ted States Ba | ankruptcy Court for | the: NORTHER | RN DISTRIC | CT OF ILLIN | IOIS | | | | |
| Cas | se number _ | | | | | - | | I | Check if t amended | |
| _ | | orm 106A/B e A/B: Pr | - | | | | | | | 12/15 |
| hink nfor nsv | it fits best. E mation. If mor ver every ques | Be as complete and a re space is needed, a stion. | ccurate as possibl attach a separate s | le. If two ma heet to this | arried people form. On the | n asset fits in more than on are filing together, both are top of any additional page n or Have an Interest In | e equally responsib | le for sup | plying correct | - |
| | No. Go to Par Yes. Where i | rt 2. is the property? | | | | | | | | |
| 1.1 | 370 Norm | an Lano | | | | ? Check all that apply | | | | |
| | Street address, | cription | | • | ome i-unit building or cooperative | the amount of an | deduct secured claims or exemptions. Put bunt of any secured claims on Schedule D: rs Who Have Claims Secured by Property. | | | |
| | Roselle | IL State | 60172-0000 ZIP Code | | fanufactured of and | or mobile home | Current value of entire property? | | Current value portion you ov \$217, | |
| | | | | | imeshare Other s an interest | in the property? Check one | Describe the na (such as fee sin a life estate), if I | ıple, tenaı | | |
| | | | | | ebtor 1 only | | Fee simple | | | |
| | DuPage | | | | ebtor 2 only | Nahitan Olamba | | | | |
| | County | | | □ A | | Deptor 2 only the debtors and another by wish to add about this ite | (see instructio | | unity property | , |
| | | | | | / identification | | | | | |

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here......>>

\$217,500.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

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Case number (if known) Document Debtor 1 Raymond A. Habel 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put **Toyota** Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: **FJ Cruiser** Creditors Who Have Claims Secured by Property. Model: Debtor 1 only 2008 Year: Debtor 2 only Current value of the Current value of the 52000 Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another Car needs body repair and new \$10,000.00 \$10,000.00 brakes and tires. AC needs ☐ Check if this is community property (see instructions) recharging. This vehicle has a plug in for Oxvaen. His mother needs this during transportation. 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$10,000,00 pages you have attached for Part 2. Write that number here.....= Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... **Used Furniture** \$400.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games □ No Yes. Describe..... **Two Old Televisions** \$100.00 \$75.00 Old Laptop Computer 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ☐ No Official Form 106A/B Schedule A/B: Property page 2

Case 16-39204

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| Debtor 1 | Case 16-39 | | oc 1 | Filed 12/13/16 Document | Entered 12/13 Page 12 of 46 | 3/16 15:15:34 Case number (if known) | Desc Main | |
|---|---|--|-------------|--|--------------------------------|---|--|------------------|
| Yes. | Describe | | | | | | | |
| | E | Bicycle | | | | | | \$20.00 |
| | C | Solf Clubs | <u> </u> | | | | | \$25.00 |
| | | | <u> </u> | | | | - | V |
| ■ No | oles: Pistols, rifles, s | shotguns, an | nmunition, | , and related equipmen | t | | | |
| 11. Clothe | | es, furs, lea | ther coats | , designer wear, shoes | , accessories | | | |
| | Describe | | | | | | | |
| | Ū | Jsed Cloth | ning | | | | | \$70.00 |
| ■ No □ Yes. 3. Non-fa Examp ■ No □ Yes. 4. Any ot □ No ■ Yes. | Describe rm animals ples: Dogs, cats, bird Describe her personal and h Give specific inform E | ds, horses nousehold i nation Books, CD | entries fro | did not already list, i | ny entries for pages y | ids you did not list | | \$25.00 15.00 |
| Part 4: De | scribe Your Financia | l Assets | | | | | | |
| Do you ow | vn or have any lega | al or equita | ble intere | st in any of the follow | ring? | | Current value portion you ov Do not deduct s claims or exem | wn? secured |
| □ No | | • | | ur home, in a safe dep | osit box, and on hand w | hen you file your petition | no | |
| | | | | | | Cash | | \$22.00 |
| Exam _p □ No | | | | accounts; certificates ounts with the same ins | | edit unions, brokerage h | nouses, and other sin | nilar |

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Case number (if known) Document Debtor 1 Raymond A. Habel **BMO Harris Bank** Roselle, IL \$300.00 17.1. Checking #8700 **BMO Harris** Roselle, IL \$45.00 17.2. Savings #0450 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ■ No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured

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Case number (if known) Document Debtor 1 Raymond A. Habel claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ■ No ☐ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$367.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

37. Do you own or have any legal or equitable interest in any business-related property?

No. Go to Part 6.

☐ Yes. Go to line 38.

Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

No. Go to Part 7.

☐ Yes. Go to line 47.

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Case number (if known) Document

Debtor 1 Raymond A. Habel Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$217,500.00 Part 2: Total vehicles, line 5 56. \$10,000.00 Part 3: Total personal and household items, line 15 57. \$715.00 Part 4: Total financial assets, line 36 58. \$367.00 Part 5: Total business-related property, line 45 59. \$0.00

\$0.00

\$0.00

\$11,082.00

Copy personal property total

63. Total of all property on Schedule A/B. Add line 55 + line 62

Part 6: Total farm- and fishing-related property, line 52

Part 7: Total other property not listed, line 54

Total personal property. Add lines 56 through 61...

\$228,582.00

\$11,082.00

Official Form 106A/B Schedule A/B: Property page 6

| | Case 16-39204 Doc 1 | Filed 12/13/16 | Entered 12/13/16 15:15: | :34 Desc Main |
|--------------------------|---|--|---|--|
| Fil | I in this information to identify your case: | | | |
| De | Raymond A. Habel | ddle Name | Last Name | |
| | btor 2 ouse if, filing) First Name Mic | ddle Name | Last Name | |
| Un | ited States Bankruptcy Court for the: NORTH | HERN DISTRICT OF IL | LINOIS | |
| (if k | se number | | | ☐ Check if this is an amended filing |
| | <u>fficial Form 106C</u> chedule C: The Proper [.] | ty You Clai | m as Exempt | 4/16 |
| the nee | as complete and accurate as possible. If two ma property you listed on Schedule A/B: Property (oded, fill out and attach to this page as many cope number (if known). | Official Form 106A/B) a | s your source, list the property that you o | claim as exempt. If more space is |
| spe any fun exe | each item of property you claim as exempt, cific dollar amount as exempt. Alternatively, applicable statutory limit. Some exemptions ds—may be unlimited in dollar amount. Howemption to a particular dollar amount and the he applicable statutory amount. | you may claim the ful —such as those for hever, if you claim an e | I fair market value of the property bein ealth aids, rights to receive certain be xemption of 100% of fair market value | ng exempted up to the amount of enefits, and tax-exempt retirement a under a law that limits the |
| Pa | rt 1: Identify the Property You Claim as Ex | empt | | |
| 1. | Which set of exemptions are you claiming? | Check one only, even | if your spouse is filing with you. | |
| | ■ You are claiming state and federal nonbank | ruptcy exemptions. 11 | U.S.C. § 522(b)(3) | |
| | ☐ You are claiming federal exemptions. 11 U | .S.C. § 522(b)(2) | | |
| 2. | For any property you list on Schedule A/B to | nat you claim as exem | ppt, fill in the information below. | |
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption |

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amo | ount of the exemption you claim | Specific laws that allow exemption |
|--|--------------------------------------|-----|---|------------------------------------|
| | Copy the value from Schedule A/B | Che | | |
| 2008 Toyota FJ Cruiser 52000 miles Car needs body repair and new brakes and tires. AC needs | \$10,000.00 | | \$2,400.00 100% of fair market value, up to | 735 ILCS 5/12-1001(c) |
| recharging. This vehicle has a plug in for Oxygen. His mother needs this during transportation. Line from <i>Schedule A/B</i> : 3.1 | | | any applicable statutory limit | |
| 2008 Toyota FJ Cruiser 52000 miles Car needs body repair and new | \$10,000.00 | | \$2,988.00 | 735 ILCS 5/12-1001(b) |
| brakes and tires. AC needs recharging. This vehicle has a plug in for Oxygen. His mother needs this during transportation. Line from Schedule A/B: 3.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| Used Furniture Line from Schedule A/B: 6.1 | \$400.00 | | \$400.00 | 735 ILCS 5/12-1001(b) |
| Ellio II oli obiloddio 7 V.D. 411 | | | 100% of fair market value, up to any applicable statutory limit | |
| | | | | |

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Case number (if known)

| Debtor 1 | Raymond A. Habel | Document | | Case number (if known) | |
|----------|---|--------------------------------------|--------|---|------------------------------------|
| | of description of the property and line on needule A/B that lists this property | Current value of the portion you own | Amo | ount of the exemption you claim | Specific laws that allow exemption |
| | | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | |
| | o Old Televisions e from Schedule A/B: 7.1 | \$100.00 | • | \$100.00 | 735 ILCS 5/12-1001(b) |
| Liik | o nom concurre /v.b | | | 100% of fair market value, up to any applicable statutory limit | |
| | d Laptop Computer | \$75.00 | • | \$75.00 | 735 ILCS 5/12-1001(b) |
| | | | | 100% of fair market value, up to any applicable statutory limit | |
| | cycle e from Schedule A/B: 9.1 | \$20.00 | | \$20.00 | 735 ILCS 5/12-1001(b) |
| 2 | o nom concedito / v.s. con | | | 100% of fair market value, up to any applicable statutory limit | |
| | If Clubs e from Schedule A/B: 9.2 | \$25.00 | | \$25.00 | 735 ILCS 5/12-1001(b) |
| LIII | e nom denedate A/E. 4.2 | | | 100% of fair market value, up to any applicable statutory limit | |
| | ed Clothing e from Schedule A/B: 11.1 | \$70.00 | | \$70.00 | 735 ILCS 5/12-1001(a) |
| LIII | e nom denedate A/E. 1111 | | | 100% of fair market value, up to any applicable statutory limit | |
| | oks, CDs + DVDs e from Schedule A/B: 14.1 | \$25.00 | | \$25.00 | 735 ILCS 5/12-1001(b) |
| LIII | o nom concurre /v.b. · · · · | | | 100% of fair market value, up to any applicable statutory limit | |
| Ca | sh e from Schedule A/B: 16.1 | \$22.00 | | \$22.00 | 735 ILCS 5/12-1001(b) |
| LIIK | e nom schedule A.B. 19.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | ecking: BMO Harris Bank selle. IL | \$300.00 | | \$300.00 | 735 ILCS 5/12-1001(b) |
| #87 | 700 e from <i>Schedule A/B</i> : 17.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | vings: BMO Harris selle, IL | \$45.00 | | \$45.00 | 735 ILCS 5/12-1001(b) |
| #04 | 450 e from <i>Schedule A/B</i> : 17.2 | | | 100% of fair market value, up to any applicable statutory limit | |
| | e you claiming a homestead exemption bject to adjustment on 4/01/19 and every No Yes. Did you acquire the property cover No Yes | 3 years after that for ca | ses fi | , | , |

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| | | Document | Page 18 | 3 of 46 | | |
|--------------------------|---------------------------------|--|---------------------------------------|---|--|--------------------|
| Fill in this inf | ormation to identify you | ır case: | | | | |
| Debtor 1 | Raymond A. Ha | hal | | | | |
| Debior 1 | First Name | Middle Name | Last Name | | - | |
| Debtor 2 | | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | • | |
| Halifa d Orașia | Dead was teachers | NODTHERN DICTRICT OF HILL | NOIC | | | |
| United States | Bankruptcy Court for the: | NORTHERN DISTRICT OF ILLI | NOIS | | - | |
| Case number | | | | | | |
| (if known) | | | | | ☐ Check | if this is an |
| | | | | | | led filing |
| | | | | | | J |
| Official Fo | rm 106D | | | | | |
| Schodul | o D: Croditors | Who Have Claims S | Socuro | d by Proport | N/ | 12/15 |
| <u> Scriedui</u> | e D. Creditors | WIID Have Claims 3 | becui e | d by Propert | <u>y </u> | 12/13 |
| | | If two married people are filing togethe out, number the entries, and attach it to | | | | |
| number (if know | | | | | pagos,o year | |
| 1. Do any credit | ors have claims secured by | y your property? | | | | |
| □ No. Ch | eck this box and submit th | his form to the court with your other s | schedules. Y | ou have nothing else t | o report on this form. | |
| _ | | , | , , , , , , , , , , , , , , , , , , , | od navo notimig oldo t | o report ou une fermi. | |
| ■ Yes. Fi | Il in all of the information | below. | | | | |
| Part 1: Lis | t All Secured Claims | | | | | |
| 2. List all secur | red claims. If a creditor has r | more than one secured claim, list the cred | litor separately | Column A | Column B | Column C |
| | | a particular claim, list the other creditors | | Amount of claim | Value of collateral | Unsecured |
| much as possib | e, list the claims in alphabeti | cal order according to the creditor's name | | Do not deduct the value of collateral. | that supports this claim | portion If any |
| 2.1 Chase | Home Finance | Describe the property that secures th | ne claim: | \$210,429.00 | \$217,500.00 | \$0.00 |
| Creditor's N | lame | 370 Norman Lane Roselle, IL | 60172 | | | |
| | | DuPage County | | | | |
| Mail Co | de OH4-7302 | As of the date year file the plain is a | | | | |
| P.O. Bo | x 24696 | As of the date you file, the claim is: C apply. | neck all that | | | |
| Columi | ous, OH 43224 | Contingent | | | | |
| Number, St | reet, City, State & Zip Code | ☐ Unliquidated | | | | |
| | | ☐ Disputed | | | | |
| Who owes the | e debt? Check one. | Nature of lien. Check all that apply. | | | | |
| ■ Debtor 1 onl | V | ☐ An agreement you made (such as m | ortgage or se | cured | | |
| Debtor 2 onl | | car loan) | | | | |
| ☐ Debtor 1 and | • | ☐ Statutory lien (such as tax lien, mech | nanic's lien) | | | |
| _ | of the debtors and another | ☐ Judgment lien from a lawsuit | , | | | |
| | s claim relates to a | | Mortgage | | | |
| community | | — Other (including a right to onset) | | | | |
| - | | | 077.4 | | | |
| Date debt was | incurred | Last 4 digits of account number | er <u>0774</u> | | | |
| 2.2 Chase | Home Finance | Describe the property that secures the | o claim: | \$43,556.00 | \$217,500.00 | \$36,485.00 |
| Creditor's N | | | | Ψ43,330.00 | φ217,300.00 | \$30,463.00 |
| | | 370 Norman Lane Roselle, IL DuPage County | 00172 | | | |
| Mail Co | de OH4-7302 | Durage County | | | | |
| | ox 24696 | As of the date you file, the claim is: C | heck all that | | | |
| | ous, OH 43224 | apply. Contingent | | | | |
| | reet, City, State & Zip Code | ☐ Unliquidated | | | | |
| ramber, er | root, only, oldic a zip code | ☐ Disputed | | | | |
| Who owes the | e debt? Check one. | Nature of lien. Check all that apply. | | | | |
| Dahtar 4 and | | ☐ An agreement you made (such as m | ortnane or se | cured | | |
| Debtor 1 onl | | car loan) | iortgage or se | cuieu | | |
| Debtor 2 onl | | | handala Prosid | | | |
| Debtor 1 and | • | Statutory lien (such as tax lien, mech | nanic's lien) | | | |
| | of the debtors and another | ☐ Judgment lien from a lawsuit | Coocnel M | ortanac | | |
| ☐ Check if thi community | s claim relates to a | Other (including a right to offset) | Second Mo | oi iyaye | | |
| Community | 4001 | | | | | |
| Date debt was | incurred | Last 4 digits of account number | er 0810 | | | |

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| Debtor 1 | Raymond A. Habel | | | Case number (if know) | |
|----------|------------------|-------------|-----------|-----------------------|--|
| | First Name | Middle Name | Last Name | | |

Add the dollar value of your entries in Column A on this page. Write that number here: \$253,985.00
If this is the last page of your form, add the dollar value totals from all pages.
Write that number here: \$253,985.00

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

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| | Ou | .50 10 0020+ 1 | Document | t Page 20 of 46 | 7.10.04 Desc Main | |
|------------------------------------|---|--|--|--|--|---|
| Filli | n this inforn | nation to identify your | | | | |
| Deb | tor 1 | Raymond A. Habe | اد | | | |
| | | First Name | Middle Name | Last Name | _ | |
| Deb | | | | | | |
| (Spou | ise if, filing) | First Name | Middle Name | Last Name | | |
| Unite | ed States Bar | nkruptcy Court for the: | NORTHERN DISTRICT OF | FILLINOIS | _ | |
| Case | e number | | | | | |
| (if kno | own) | | | | ☐ Check if this is an | |
| | | | | | amended filing | |
| Offi | cial Form | n 106E/F | | | | |
| | | | ho Have Unsecur | ed Claims | 12/15 | |
| any e Sched Sched left. A | xecutory conti dule G: Execut dule D: Credito attach the Con | racts or unexpired leases tory Contracts and Unexp ors Who Have Claims Sec | that could result in a claim. A ired Leases (Official Form 106 ured by Property. If more space | also list executory contracts on Schedule G). Do not include any creditors with par te is needed, copy the Part you need, fill i | h NONPRIORITY claims. List the other party A/B: Property (Official Form 106A/B) and on tially secured claims that are listed in it out, number the entries in the boxes on the n the top of any additional pages, write your | |
| Part | 1: List Al | I of Your PRIORITY Ur | secured Claims | | | _ |
| 1. [| Do any credito | ors have priority unsecure | d claims against you? | | | |
| ı | No. Go to Pa | art 2. | | | | |
| [| ☐ Yes. | | | | | |
| Part | 2: List Al | I of Your NONPRIORIT | Y Unsecured Claims | | | _ |
| 3. [| Do any credito | ors have nonpriority unsec | cured claims against you? | | | |
| [| ☐ No. You hav | ve nothing to report in this p | art. Submit this form to the court | with your other schedules. | | |
| ı | Yes. | | | | | |
| t | unsecured clain | n, list the creditor separately | y for each claim. For each claim I | | a creditor has more than one nonpriority t list claims already included in Part 1. If more cured claims fill out the Continuation Page of | |
| | _ | | | | Total claim | |
| 4.1 | BP Visa | 1 | Last 4 digits of | f account number 3468 | \$13,149.00 |) |
| | | Creditor's Name | When was the | dobt inquered? | | |
| | | x 530942 GA 30353 | When was the | debt incurred? | | |
| | | treet City State Zlp Code | As of the date | you file, the claim is: Check all that apply | | |
| | Who incu | rred the debt? Check one. | | | | |
| | Debtor | 1 only | ☐ Contingent | | | |
| | ☐ Debtor | 2 only | ☐ Unliquidated | Ł | | |
| | ☐ Debtor | 1 and Debtor 2 only | ☐ Disputed | | | |
| | ☐ At least | t one of the debtors and and | | RIORITY unsecured claim: | | |
| | | if this claim is for a comi | По | าร | | |
| | debt | | ☐ Obligations a | arising out of a separation agreement or div | orce that you did not | |
| | _ | m subject to offset? | report as priority | • | | |
| | ■ No | | | nsion or profit-sharing plans, and other simil | ar debts | |
| | ☐ Yes | | Other. Speci | Credit Card Purchases | | |

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Debtor 1 Raymond A. Habel Case number (if know) 4.2 \$0.00 Capital Management Services, LP Last 4 digits of account number Nonpriority Creditor's Name 698 1/2 South Ogden Street When was the debt incurred? Buffalo, NY 14206 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collector for Discover ☐ Yes 4.3 Citi Cards \$2,339.00 Last 4 digits of account number 3801 Nonpriority Creditor's Name **Processing Center** When was the debt incurred? Des Moines, IA 50363 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Commerce Bank** 4.4 Last 4 digits of account number 7369 \$3,709.00 Nonpriority Creditor's Name P.O. Box 410857 When was the debt incurred? Kansas City, MO 64141 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card Purchases ☐ Yes

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Debtor 1 Raymond A. Habel Case number (if know) 4.5 \$3,889.00 Discover Last 4 digits of account number 4142 Nonpriority Creditor's Name P.O. Box 6103 When was the debt incurred? Carol Stream, IL 60197 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card Purchases ☐ Yes 4.6 Lowes Last 4 digits of account number 7084 \$5,154.00 Nonpriority Creditor's Name P.O. Box 965005 When was the debt incurred? Orlando, FL 32896 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No **Credit Card Purchases** ☐ Yes Other. Specify 4.7 Midland Credit Management, Inc. Last 4 digits of account number \$0.00 Nonpriority Creditor's Name 8875 Aero Drive, Ste. 200 When was the debt incurred? San Diego, CA 92123 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collector for Citi Cards

☐ Yes

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Page 23 of 46 Case number (if know) Document Debtor 1 Raymond A. Habel

| NBC Management Services, Inc. | Last 4 digits of account number | |
|---|---|--|
| Nonpriority Creditor's Name | | |
| P.O. Box 1099 | When was the debt incurred? | |
| Langhorne, PA 19047 | | |
| Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | | |
| ■ Debtor 1 only | ☐ Contingent | |
| ☐ Debtor 2 only | ☐ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | |
| ■ No | lacktriangle Debts to pension or profit-sharing plans, and other similar debts | |
| ☐ Yes | ■ Other. Specify Collector for Commerce Bank | |

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | 1 | Total Claim |
|--------------|-----|---|-----|----|-------------|
| | 6a. | Domestic support obligations | 6a. | \$ | 0.00 |
| Total claims | | | | | |
| from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ | 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ | 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ | 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ | 0.00 |
| | | | | 1 | Total Claim |
| | 6f. | Student loans | 6f. | \$ | 0.00 |
| Total claims | | | | | |
| from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ | 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ | 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ | 28,240.00 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ | 28,240.00 |

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| | | 17/7/11/11/ | 3 H 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | |
|---------------------|--------------------------|-------------------|---|--|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Raymond A. Hab | el | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | |
| | | | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | company with | n whom you have the er, Street, City, State and ZIP C | contract or lease | State what the contract or lease is for |
|-----|-----------|--------------|--|-------------------|---|
| 2.1 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.2 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.3 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.4 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.5 | | | | | |
| | Name | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| | • | | | | |

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| | | Docume | ent Page 25 o | of 46 | |
|----------------|--|---------------------------------|---------------------------|---|--|
| Fill in this | s information to identify you | ur case: | | | |
| Debtor 1 | Daymand A. Us | hal | | | |
| Deplor | Raymond A. Ha | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, fi | ling) First Name | Middle Name | Last Name | | |
| United St | ates Bankruptcy Court for the | : NORTHERN DISTRICT | OF ILLINOIS | | |
| United St | ates bankruptcy Count for the | . NORTHERN DISTRICT | OI ILLINOIS | | |
| Case num | nber | | | | |
| (if known) | | | | | ☐ Check if this is an |
| | | | | | amended filing |
| Oπ: -:- | .I Гаша 400II | | | | |
| | al Form 106H | | | | |
| Sched | dule H: Your Co | debtors | | | 12/15 |
| | | | | | |
| our name | e and case number (if know | n). Answer every question | | | any Additional Pages, write |
| 1. 00 | you have any codebiors? | in you are niing a joint case, | do not list either spouse | e as a codeptor. | |
| ■ No |) | | | | |
| ☐ Ye | S | | | | |
| | | | | | |
| | thin the last 8 years, have y na, California, Idaho, Louisiar | | | | tes and territories include |
| Alizo | na, Camorna, Idano, Lodisiai | ia, ivevada, ivew iviexico, i d | cito rico, rexas, wasi | inigion, and wisconsin.) | |
| ■ No | . Go to line 3. | | | | |
| ☐ Ye | s. Did your spouse, former sp | oouse, or legal equivalent live | e with you at the time? | | |
| | | | | | |
| in lin Form | e 2 again as a codebtor onl | y if that person is a guaran | tor or cosigner. Make | sure you have listed the c | th you. List the person shown reditor on Schedule D (Official edule E/F, or Schedule G to fill |
| | Column 1: Your codebtor | | | Column 2: The credito | or to whom you owe the debt |
| | Name, Number, Street, City, State and | d ZIP Code | | Check all schedules th | at apply: |
| 2.4 | | | | Cabadula D lina | |
| 3.1 | Name | | | Schedule D, line | |
| | | | | ☐ Schedule E/F, line☐ Schedule G, line☐ | |
| | | | | Schedule G, line | |
| | Number Street | 0 | 710.0 | | |
| | City | State | ZIP Code | | |
| | | | | _ | |
| 3.2 | - N | | | Schedule D, line | |
| | Name | | | ☐ Schedule E/F, line | |
| | | | | ☐ Schedule G, line | |
| | Number Street | | | _ | |
| | City | State | ZIP Code | | |

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| Fill | in this information t | to identify your ca | ase: | | | | I | | | | |
|----------------------------|---|--|---|--|-----------------------|----------------|--------------|------------------------|---------------------------|----------------------------------|-----------------|
| | otor 1 | Raymond A. | | | | | | | | | |
| | otor 2 ouse, if filing) | | | | | _ | | | | | |
| Uni | ted States Bankrup | otcy Court for the | : NORTHERN DISTRIC | T OF ILLINOIS | | | | | | | |
| (If kr | se number | | | | | | □ Ar | | d filing ent showing | g postpetition ollowing date: | |
| | fficial Form | | | | | | M | M / DD/ Y | YYY | | |
| Be a sup spo atta | plying correct info use. If you are sep ch a separate she | ccurate as poss ormation. If you parated and you | Sible. If two married peo are married and not filir r spouse is not filing wi On the top of any addition | ng jointly, and you th you, do not incl | r spouse ude infor | is liv mati | ing with you | you, incli your spo | ude inform ouse. If mo | nation about ore space is | your needed, |
| 1. | Fill in your empl | • • | | Debtor 1 | | | | Debtor 2 | or non-fil | ling spouse | |
| | If you have more attach a separate information about employers. | page with | Employment status | ■ Employed □ Not employed | | | | ☐ Emplo | • | | |
| | Include part-time | | Occupation Employer's name | Disabled Veter | ran | | | | | | |
| | Occupation may or homemaker, if | | Employer's address | | | | | | | | |
| | | | How long employed the | nere? | | | | _ | | | |
| Esti spou | mate monthly incouse unless you are | separated. spouse have mo | ate you file this form. If you | | · | | · | hat perso | n on the lir | nes below. If | · · |
| 2. | , , | O ' | ry, and commissions (becalculate what the monthle | | 2. | \$ | | 0.00 | \$ | ng spouse | |
| 3. | Estimate and lis | t monthly overti | ime pay. | | 3. | +\$ | | 0.00 | +\$ | N/A | |
| 4. | Calculate gross | Income. Add lin | ne 2 + line 3. | | 4. | \$ | | 0.00 | \$ | N/A | |

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| Deb | tor 1 | Raymond A. Habel | _ | Case | number (if known) | | | |
|-----|---------------------------------|---|--------------------------|--------------------------|------------------------------|------------------------|--------------------------|-----------------|
| | | | | | Debtor 1 | non-fili | btor 2 or | |
| | Cop | y line 4 here | 4. | \$_ | 0.00 | \$ | N/A | - |
| 5. | List | all payroll deductions: | | | | | | |
| | 5a. 5b. 5c. | Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans | 5a. 5b. 5c. | \$_ \$_ \$_ | 0.00 0.00 0.00 | \$ \$ \$ | N/A N/A N/A | - - - |
| | 5d. 5e. 5f. 5g. 5h. | Required repayments of retirement fund loans Insurance Domestic support obligations Union dues Other deductions Specific | 5d. 5e. 5f. 5g. | \$_ \$_ \$_ \$_ | 0.00 0.00 0.00 0.00 | \$ \$ \$ + \$ | N/A N/A N/A N/A | - - - |
| 6. | | Other deductions. Specify: the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 5h.+ 6. | . ф_ | | + \$ \$ | N/A N/A | - |
| 7. | | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | Ψ \$ | 0.00 | \$ | N/A N/A | - |
| 8. | | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a. | * — \$ | 0.00 | \$ | N/A | |
| | 8b. | Interest and dividends | 8b. | \$ - | 0.00 | \$ | N/A | - |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c. | \$ | 0.00 | \$ | N/A | - |
| | 8d. | Unemployment compensation | 8d. | \$ | 0.00 | \$ | N/A | |
| | 8e. 8f. | Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | 8e. 8f. | \$_ \$ | 0.00 | \$ \$ | N/A N/A | _ |
| | 8g. | Pension or retirement income | 8g. | \$_ | 0.00 | \$ | N/A | |
| | 8h. | Other monthly income. Specify: Veteran's Assistance Benefits | 8h.+ | \$ | 2,890.43 | + \$ | N/A | |
| 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | 2,890.43 | \$ | N/A | <u> </u> |
| 10. | | culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. \$ | | 2,890.43 + \$_ | 1 | N/A = \$ | 2,890.43 |
| 11. | Inclu othe | e all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify: | depen | | • | | edule J. 11. +\$ | 0.00 |
| 12. | | the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies | | | | , if it | 12. \$ | 2,890.43 |
| | _ | | _ | | | | Combir monthl | ned y income |
| 13. | Do y | ou expect an increase or decrease within the year after you file this form No. Yes. Explain: | ? | | | | | |

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| Filli | in this information to identify your case: | | 1 | | |
|-------------|---|--------------------------|-----------------|---|---|
| Debt | otor 1 Raymond A. Habel | | Chec | ck if this is: | |
| | otor 2 ouse, if filing) | | _ | An amended filing A supplement show 13 expenses as of | ving postpetition chapter the following date: |
| `` | ted States Bankruptcy Court for the: NORTHERN DISTRICT OF IL | LINOIS | _ | MM / DD / YYYY | |
| | | LINOIO | | WIWI / DD / TTTT | |
| | nown) | | | | |
| Of | fficial Form 106J | | | | |
| | chedule J: Your Expenses | | | | 12/1 |
| info | as complete and accurate as possible. If two married people ormation. If more space is needed, attach another sheet to the mber (if known). Answer every question. | | | | |
| Part | t 1: Describe Your Household Is this a joint case? | | | | |
| ١. | No. Go to line 2. | | | | |
| | ☐ Yes. Does Debtor 2 live in a separate household? | | | | |
| | ☐ No ☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expen</i> | nses for Separate House | ehold of Deb | tor 2. | |
| 2. | Do you have dependents? ■ No | | | | |
| | Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent | | | Dependent's age | Does dependent live with you? |
| | Do not state the | | | | □ No |
| | dependents names. | | | | □ Yes □ No |
| | | | | | ☐ Yes |
| | | | | | □ No |
| | | | | | ☐ Yes |
| | | | | | □ No □ Yes |
| 3. | Do your expenses include ■ No | | | | □ res |
| | expenses of people other than yourself and your dependents? | | | | |
| Esti exp | t 2: Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unless benses as of a date after the bankruptcy is filed. If this is a solicable date. | | | | |
| the | lude expenses paid for with non-cash government assistand value of such assistance and have included it on <i>Schedule</i> ficial Form 106I.) | | | Your exp | enses |
| 4. | The rental or home ownership expenses for your residence payments and any rent for the ground or lot. | e. Include first mortgag | e 4. \$ | i | 1,400.00 |
| | If not included in line 4: | | | | |
| | 4a. Real estate taxes | | 4a. \$ | ; | 0.00 |
| | 4b. Property, homeowner's, or renter's insurance | | 4b. \$ | | 70.00 |
| | 4c. Home maintenance, repair, and upkeep expenses | | 4c. \$ | | 50.00 |
| 5 | 4d. Homeowner's association or condominium dues | homo oquity laans | 4d. \$ 5. \$ | | 0.00 |
| 5. | Additional mortgage payments for your residence, such as | s nome equity loans | D. 1 |) | V.UU |

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| Debtor 1 | Raymond A. Habel | Case numl | ber (if known) | |
|------------|---|-----------------|----------------|----------------------------|
| i. Util | ities: | | | |
| 6a. | Electricity, heat, natural gas | 6a. | \$ | 155.17 |
| 6b. | Water, sewer, garbage collection | 6b. | | 36.20 |
| 6c. | Telephone, cell phone, Internet, satellite, and cable services | 6c. | \$ | 84.47 |
| 6d. | Other. Specify: Cable | 6d. | \$ | 139.12 |
| | Trash Removal | | \$ | 25.82 |
| Foo | d and housekeeping supplies | 7. | \$ | 400.00 |
| Chi | dcare and children's education costs | 8. | \$ | 0.00 |
| Clo | thing, laundry, and dry cleaning | 9. | \$ | 50.00 |
| . Per | sonal care products and services | 10. | \$ | 75.00 |
| . Med | lical and dental expenses | 11. | \$ | 30.00 |
| | nsportation. Include gas, maintenance, bus or train fare. | 40 | Ф. | 200.00 |
| | not include car payments. | 12. | · | |
| | ertainment, clubs, recreation, newspapers, magazines, and books | 13. | · | 0.00 |
| | ritable contributions and religious donations | 14. | \$ | 0.00 |
| | urance. | | | |
| | not include insurance deducted from your pay or included in lines 4 or 20. Life insurance | 15a. | ¢ | 0.00 |
| | | 15a. 15b. | * | 0.00 |
| | . Health insurance . Vehicle insurance | 15b. 15c. | · | 0.00 |
| | | | | 98.00 |
| | Other insurance. Specify: | 15d. | Φ | 0.00 |
| | es. Do not include taxes deducted from your pay or included in lines 4 or 20. cify: | 16. | \$ | 0.00 |
| | allment or lease payments: | | • | |
| | . Car payments for Vehicle 1 | 17a. | \$ | 0.00 |
| 17b | . Car payments for Vehicle 2 | 17b. | \$ | 0.00 |
| 17c | Other. Specify: | 17c. | \$ | 0.00 |
| | Other. Specify: | 17d. | \$ | 0.00 |
| . You | r payments of alimony, maintenance, and support that you did not report | t as | | |
| | ucted from your pay on line 5, Schedule I, Your Income (Official Form 10 | 6I). 18. | · | 0.00 |
| . Oth | er payments you make to support others who do not live with you. | | \$ | 0.00 |
| | cify: | 19. | | |
| | er real property expenses not included in lines 4 or 5 of this form or on S | | | |
| | . Mortgages on other property | 20a. | · | 0.00 |
| | . Real estate taxes | 20b. | • | 0.00 |
| | Property, homeowner's, or renter's insurance | 20c. | | 0.00 |
| | . Maintenance, repair, and upkeep expenses | 20d. | · | 0.00 |
| 20e | . Homeowner's association or condominium dues | 20e. | | 0.00 |
| . Oth | er: Specify: | 21. | +\$ | 0.00 |
| . Cal | culate your monthly expenses | | | |
| 22a | . Add lines 4 through 21. | | \$ | 2,813.78 |
| 22b | . Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J | -2 | \$ | · · |
| | Add line 22a and 22b. The result is your monthly expenses. | | \$ | 2,813.78 |
| | , , , | | | _, |
| | culate your monthly net income. | 00- | œ. | 0.000.40 |
| | Copy line 12 (your combined monthly income) from Schedule I. | 23a. | | 2,890.43 |
| 23b | . Copy your monthly expenses from line 22c above. | 23b. | - \$ | 2,813.78 |
| 23c | Subtract your monthly expenses from your monthly income. | | | |
| | The result is your <i>monthly net income</i> . | 23c. | \$ | 76.65 |
| Formod | you expect an increase or decrease in your expenses within the year afte example, do you expect to finish paying for your car loan within the year or do you expect iffication to the terms of your mortgage? | | | e or decrease because of a |
| = 1 | | | | |
| | Yes. Explain here: | | | |

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| Fill in this infor | mation to identify your | case: | | | |
|---------------------|--|--------------------------|-------------------------------|-------------------------|--|
| Debtor 1 | Raymond A. Hab | el | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRIC | T OF ILLINOIS | | |
| Case number | | | | | |
| (if known) | | | | | Check if this is an amended filing |
| | tion About a | | l Debtor's Sc | | 12/15 |
| ir two married p | eopie are filing togethe | r, both are equally resp | onsible for supplying corr | ect information. | |
| obtaining mone | | n connection with a bar | | | nent, concealing property, or , or imprisonment for up to 20 |
| Sig | n Below | | | | |
| Did you pa | ay or agree to pay some | eone who is NOT an atto | orney to help you fill out ba | ankruptcy forms? | |
| ■ No | | | | | |
| ☐ Yes. | Name of person | | | | uptcy Petition Preparer's Notice, and Signature (Official Form 119) |
| • | alty of perjury, I declare re true and correct. | that I have read the sur | mmary and schedules filed | I with this declaration | and |
| X /s/ Ray | ymond A. Habel | | Х | | |
| | ond A. Habel | | Signature of [| Debtor 2 | |

Date

Signature of Debtor 1

Date December 13, 2016

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| Fill | l in this inforr | nation to identify your | case: | | | | |
|-------------------|----------------------------|----------------------------------|---|--|-------------------|-------------------------------|---|
| | btor 1 | Raymond A. Hab | | | | | |
| | | First Name | Middle Name | Last Name | | _ | |
| _ | btor 2 ouse if, filing) | First Name | Middle Name | Last Name | | _ | |
| Un | ited States Ba | nkruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | | |
| Ca | se number | | | | | _ | |
| | nown) | | | | | - | Check if this is an mended filing |
| St Be | as complete a | of Financial A | Affairs for Indivi- ole. If two married people attach a separate sheet to | are filing together, both | are equally re | sponsible for sup | |
| nun | nber (if know | n). Answer every ques | | · | any additions | pagos, milo yo | ar name and sass |
| 1. | | r current marital status | | u Livea Berore | | | |
| | ☐ Married ■ Not mai | | | | | | |
| 2. | During the la | ast 3 vears. have vou li | ived anywhere other than | where you live now? | | | |
| | □ No ■ Yes. Lis | st all of the places you liv | ved in the last 3 years. Do n | oot include where you live | now. | | |
| | Debtor 1 Pr | ior Address: | Dates Debtor 1 lived there | Debtor 2 Price | r Address: | | Dates Debtor 2 lived there |
| | 370 Norma Roselle, II | | From-To: 1/2006 - 11/2 0 | ☐ Same as De | btor 1 | | ☐ Same as Debtor 1 From-To: |
| 3. stat | es and territor | <i>ies</i> include Árizona, Cali | er live with a spouse or le fornia, Idaho, Louisiana, Ne edule H: Your Codebtors (C | evada, New Mexico, Puer | | | |
| Pa | rt 2 Explai | in the Sources of Your | Income | | | | |
| 4. | Fill in the tota | al amount of income you | ployment or from operation received from all jobs and have income that you receive | all businesses, including | part-time activit | ies. | ndar years? |
| | ■ No | | | | | | |
| | _ | I in the details. | | | | | |
| | | | Debtor 1 | | Debtor 2 | 2 | |
| | | | Sources of income Check all that apply. | Gross income (before deductions are exclusions) | | s of income Il that apply. | Gross income (before deductions and exclusions) |

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Case number (if known) Debtor 1 Raymond A. Habel

| 5. | Include in | come regardless of wheth public benefit payments; | e during this year or the two ner that income is taxable. Exa pensions; rental income; inter se and you have income that y | amples of other income are al rest; dividends; money collect | ed from lawsuits; royalties; ar | |
|----|------------------------------|--|---|---|--------------------------------------|---|
| | List each | source and the gross inco | ome from each source separa | tely. Do not include income th | at you listed in line 4. | |
| | □ No | | | | | |
| | _ | Fill in the details. | | | | |
| | | | | | | |
| | | | Debtor 1 | 0 | Debtor 2 | 0 |
| | | | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Sources of income Describe below. | Gross income (before deductions and exclusions) |
| | | / 1 of current year until filed for bankruptcy: | Veteran's Assistance Benefits | \$31,790.00 | | |
| | or last caler anuary 1 to | dar year: December 31, 2015) | Veteran's Assistance Benefits | \$34,685.00 | | |
| | | | Social Security | \$25,764.00 | | |
| | | dar year before that: December 31, 2014) | Veteran's Assistance Benefits | \$34,685.00 | | |
| | | | Social Security | \$25,332.00 | | |
| | w 0 | Cantain Barmanta Vari | Made Defens Ven Filed for | Dowlesses to | | |
| Fε | rt 3: Lis | Certain Payments fou | Made Before You Filed for | Бапкгиртсу | | |
| 6. | Are eithe | Debtor 1's or Debtor 2 | 's debts primarily consumer | r debts? | | |
| | ☐ No. | | Debtor 2 has primarily consu | | are defined in 11 U.S.C. § 10 | 01(8) as "incurred by an |
| | | individual primarily for a | personal, family, or househol | ld purpose." | | |
| | | During the 90 days befo | ore you filed for bankruptcy, di | d you pay any creditor a total | of \$6,425* or more? | |
| | | □ No. Go to line 7 | 7. | , , , , | | |
| | | paid that cr | each creditor to whom you pai reditor. Do not include paymen | nts for domestic support obliga | | |
| | | | payments to an attorney for the ton 4/01/19 and every 3 years | | or after the date of adjustmen | t. |
| | Yes. | | or both have primarily consu | | of \$600 or more? | |
| | | | | | | |

| Creditor's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Was this payment for |
|--|---------------------|-------------------|----------------------|--|
| Chase Home Finance Mail Code OH4-7302 P.O. Box 24696 Columbus, OH 43224 | 9/16, 10/16 + 11/16 | \$4,101.00 | \$210,429.00 | ■ Mortgage □ Car □ Credit Card □ Loan Repayment □ Suppliers or vendors □ Other |

List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an

□ No.

Go to line 7.

attorney for this bankruptcy case.

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| | Creditor's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Was this pa | ayment for |
|-----|--|---|--|---|---------------------------------|---|
| | Chase Home Finance Mail Code OH4-7302 P.O. Box 24696 Columbus, OH 43224 | 9/16, 10/16 + 11/16 | \$1,704.00 | \$43,556.00 | | ard |
| 7. | Within 1 year before you filed for bankrup Insiders include your relatives; any general p of which you are an officer, director, person in a business you operate as a sole proprietor. alimony. | artners; relatives of any gene n control, or owner of 20% or | eral partners; partner r more of their voting | erships of which yo g securities; and ar | u are a genera ny managing a | al partner; corporations agent, including one for |
| | No☐ Yes. List all payments to an insider. | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for | this payment |
| 8. | Within 1 year before you filed for bankrup insider? Include payments on debts guaranteed or co No Yes. List all payments to an insider | | ments or transfer a | any property on a | ccount of a d | ebt that benefited an |
| | Insider's Name and Address | Dates of payment | Total amount | Amount you still owe | Reason for | this payment |
| Par | t 4: Identify Legal Actions, Repossessio | ons, and Foreclosures | paid | Still Owe | ilicidde cred | illoi s riame |
| 9. | Within 1 year before you filed for bankrup List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details. Case title | | | | | t or custody |
| 10. | Case number Within 1 year before you filed for bankrup Check all that apply and fill in the details belo No. Go to line 11. Yes. Fill in the information below. | | rty repossessed, f | oreclosed, garnis | hed, attached | d, seized, or levied? |
| | Creditor Name and Address | Describe the Property | | Date | | Value of the property |
| | | Explain what happened | | | | ргоролту |
| 11. | Within 90 days before you filed for bankru accounts or refuse to make a payment bed No ☐ Yes. Fill in the details. | | uding a bank or fir | nancial institution | , set off any a | amounts from your |
| | Creditor Name and Address | Describe the action the | creditor took | Date : taken | action was | Amount |
| 12. | Within 1 year before you filed for bankrup court-appointed receiver, a custodian, or a | | rty in the possess | ion of an assigne | e for the bene | efit of creditors, a |
| | ■ No □ Yes | | | | | |

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| Par | t 5: List Certain Gifts and Contributions | | | |
|-----|---|---|---|---------------------------|
| 13. | Within 2 years before you filed for bankru ■ No □ Yes. Fill in the details for each gift. | etcy, did you give any gifts with a total value of mo | ore than \$600 per person | ? |
| | Gifts with a total value of more than \$600 per person | Describe the gifts | Dates you gave the gifts | Value |
| | Person to Whom You Gave the Gift and Address: | | | |
| 14. | Within 2 years before you filed for bankru ■ No □ Yes. Fill in the details for each gift or co | etcy, did you give any gifts or contributions with a | total value of more than | \$600 to any charity? |
| | Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) | | Dates you contributed | Value |
| Par | t 6: List Certain Losses | | | |
| 15. | Within 1 year before you filed for bankrup or gambling? ■ No □ Yes. Fill in the details. | cy or since you filed for bankruptcy, did you lose | anything because of the | t, fire, other disaster, |
| | how the loss occurred | rescribe any insurance coverage for the loss and the amount that insurance has paid. List pendi asurance claims on line 33 of Schedule A/B: Property. | | Value of property lost |
| Par | t 7: List Certain Payments or Transfers | | | |
| 16. | consulted about seeking bankruptcy or pr | cy, did you or anyone else acting on your behalf peparing a bankruptcy petition? parers, or credit counseling agencies for services req | | rty to anyone you |
| | □ No | | | |
| | Yes. Fill in the details. | | | |
| | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo | Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
| | Law Office of Gregory J. Martucci 203 E. Irving Park Road Roselle, IL 60172 greg@martuccilaw.com | Attorney Fees + Costs | 2/2016 - 6/2016 | \$1,600.00 |
| 17. | | cy, did you or anyone else acting on your behalf pors or to make payments to your creditors? Du listed on line 16. | pay or transfer any prope | rty to anyone who |
| | No | | | |
| | Yes. Fill in the details. | | | |
| | Person Who Was Paid Address | Description and value of any property transferred | Date payment or transfer was | Amount of payment |

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Raymond A. Habel Debtor 1

| 18. | Within 2 years before you filed for bankruptor transferred in the ordinary course of your but Include both outright transfers and transfers mainclude gifts and transfers that you have already No | usiness or financial affa ade as security (such as t | airs? the granting of a | | | |
|---|---|--|----------------------------|-------------|--|---|
| | ☐ Yes. Fill in the details. | | | | | |
| | Person Who Received Transfer Address | Description and very property transfer | | payme | be any property or ents received or debts n exchange | Date transfer was made |
| | Person's relationship to you | | | | | |
| Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of whi beneficiary? (These are often called asset-protection devices.) | | | | | of which you are a | |
| | No Yes. Fill in the details. | | | | | |
| | Name of trust | Description and v | alue of the prop | perty trans | ferred | Date Transfer was |
| | | | | | | made |
| Par | List of Certain Financial Accounts, Ins | struments, Safe Deposi | t Boxes, and Sto | orage Units | S | |
| 20. | Within 1 year before you filed for bankruptcy | y, were any financial ac | counts or instru | uments he | ld in your name, or for y | our benefit, closed, |
| | sold, moved, or transferred? Include checking, savings, money market, o houses, pension funds, cooperatives, associated to the cooperative of the | | | | ; shares in banks, credi | t unions, brokerage |
| | No | | | | | |
| | Yes. Fill in the details. | Loot 4 digito of | Type of secon | int or | Data account was | l aat balanaa |
| | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) | Last 4 digits of account number | Type of account instrument | int or | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer |
| 21. | Do you now have, or did you have within 1 y cash, or other valuables? | ear before you filed for | bankruptcy, an | ıy safe dep | osit box or other depos | itory for securities, |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had acc Address (Number, S State and ZIP Code) | | Describe t | the contents | Do you still have it? |
| 22. | Have you stored property in a storage unit o | or place other than your | home within 1 | year befor | e you filed for bankrupto | cy? |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or h to it? Address (Number, S State and ZIP Code) | | Describe t | the contents | Do you still have it? |
| Par | t 9: Identify Property You Hold or Control | for Someone Fise | | | | |
| | | | ude any propert | y you borr | owed from, are storing t | for, or hold in trust |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the prop (Number, Street, City, S Code) | | Describe t | the property | Value |
| Par | t 10: Give Details About Environmental Info | , | | | | |
| | the number of Part 10, the following definition | | | | | |

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

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Debtor 1 Raymond A. Habel

> toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

| hazardous material, pollutant, contaminant, or similar term. | | | | | | | | |
|--|--|---|---|--|--|--|--|--|
| ort a | II notices, releases, and proceedings that | at you know about, regardless of wher | the | y occurred. | | | | |
| Has | Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? | | | | | | | |
| | No | | | | | | | |
| | Yes. Fill in the details. | | | | | | | |
| | | Governmental unit Address (Number, Street, City, State and ZIP Code) | d | Environmental law, if you know it | Date of notice | | | |
| Hav | e you notified any governmental unit of | any release of hazardous material? | | | | | | |
| ■ No □ Yes. Fill in the details. | | | | | | | | |
| | | Governmental unit Address (Number, Street, City, State and ZIP Code) | d | Environmental law, if you know it | Date of notice | | | |
| Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. | | | | | | | | |
| | No Yes. Fill in the details. | | | | | | | |
| | | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nat | ture of the case | Status of the case | | | |
| t 11: | Give Details About Your Business or | Connections to Any Business | | | | | | |
| Wit | nin 4 years before you filed for bankrupt | cy, did you own a business or have an | y of | the following connections to any | business? | | | |
| Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | ☐ An officer, director, or managing ex | ecutive of a corporation | | | | | | |
| | ☐ An owner of at least 5% of the voting | g or equity securities of a corporation | | | | | | |
| | No. None of the above applies. Go to F | Part 12. | | | | | | |
| | | | S. | | | | | |
| | | Describe the nature of the business | | | | | | |
| | | Name of accountant or bookkeeper | | Dates business existed | | | | |
| | | cy, did you give a financial statement t | to an | nyone about your business? Inclu | de all financial | | | |
| | No | | | | | | | |
| | Yes. Fill in the details below. | | | | | | | |
| Ad | dress | Date Issued | | | | | | |
| | ort a Hass Nad Ad Hav Na Ad Hav Bu Ca: Ca: Wittl Wittl Na Ad Na Ad | As any governmental unit notified you that No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Have you notified any governmental unit of No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Have you been a party in any judicial or adm No Yes. Fill in the details. Case Title Case Number Case Number Within 4 years before you filed for bankrupt A sole proprietor or self-employed in A member of a limited liability comp A partner in a partnership An officer, director, or managing extended to the composition of the above applies. Go to Fell years Name Address (Number, Street, City, State and ZIP Code) Within 2 years before you filed for bankrupt institutions, creditors, or other parties. | ort all notices, releases, and proceedings that you know about, regardless of wher Has any governmental unit notified you that you may be liable or potentially liable. No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Have you notified any governmental unit of any release of hazardous material? No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Have you been a party in any judicial or administrative proceeding under any envious No Yes. Fill in the details. Case Title Case Number Case Number Case Number Address (Number, Street, City, State and ZIP Code) A sole proprietor or self-employed in a trade, profession, or other activity, A member of a limited liability company (LLC) or limited liability partnersh A partner in a partnership An officer, director, or managing executive of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business Business Name Address (Number, Street, City, State and ZIP Code) No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business Business Name Address (Number, Street, City, State and ZIP Code) No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Within 2 years before you filed for bankruptcy, did you give a financial statement institutions, creditors, or other parties. | ort all notices, releases, and proceedings that you know about, regardless of when the Has any governmental unit notified you that you may be liable or potentially liable und No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Have you notified any governmental unit of any release of hazardous material? No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Case Title Case Number Case Number Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Title Give Details About Your Business or Connections to Any Business Within 4 years before you filed for bankruptcy, did you own a business or have any of A nember of a limited liability company (LLC) or limited liability partnership (L A partner in a partnership L A partner in a partnership Case of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Within 2 years before you filed for bankruptcy, did you give a financial statement to an institutions, creditors, or other parties. No Yes. Fill in the details below. Name Date Issued | ort all notices, releases, and proceedings that you know about, regardless of when they occurred. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environment of the same your potential points. No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Court or agency Name Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Court or agency Name Address Number Name Address Number Name Address Number, Street, City, State and ZIP Code) Address Number of the case Nature of the case Address Number or other activity, either full-time or part-time A partner in a partnership A partner in a partnership An officer, director, or managing executive of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Name of accountant or bookkeeper Name of accountant or bookkeeper Name of accountant or bookkeeper Describe the nature of the business Name of accountant or bookkeeper Describe the nature of the business Name of accountant or bookkeeper Describe the nature of the business Name of accountant or bookkeeper Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Inclusing institutions, creditors, or other parties. | | | |

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 6

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Debtor 1 Raymond A. Habel

are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| /s/ Rayı | mond A. Habel | |
|-----------|-----------------------|--|
| Raymo | nd A. Habel | Signature of Debtor 2 |
| Signatu | re of Debtor 1 | |
| Date _ | December 13, 2016 | Date |
| Did you a | attach additional pag | es to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? |
| No | | |
| □ Yes | | |
| Did you p | oay or agree to pay s | omeone who is not an attorney to help you fill out bankruptcy forms? |
| No | | |
| ☐ Yes. N | lame of Person | . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |

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| | | Docume | ent Page 38 of 46 | | |
|----------------------|--|---------------------------|--|-------------------------|------------------------------------|
| Fill in this info | rmation to identify your | 2000 | | | |
| | rmation to identify your o | case: | | | |
| Debtor 1 | Raymond A. Habe | Middle Name | Last Name | | |
| Debtor 2 | First Name | Middle Name | Last Name | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States B | Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case number | | | | | |
| (if known) | | | | | Check if this is an amended filing |
| Official For Stateme | | n for Individu | uals Filing Under | Chapter 7 | 12/15 |
| | dividual filing under chap ve claims secured by you | , • | this form if: | | |
| You must file th | never is earlier, unless th | ithin 30 days after you f | oired. ile your bankruptcy petition or l e for cause. You must also send | | |
| | people are filing together and date the form. | in a joint case, both are | equally responsible for supply | ing correct informatior | n. Both debtors must |
| | and accurate as possibly | | led, attach a separate sheet to t | his form. On the top of | any additional pages, |

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below

| Identify the creditor and the property that is collateral | What do you intend to do with the property that secures a debt? | Did you claim the property as exempt on Schedule C? |
|---|--|---|
| Creditor's Chase Home Finance | ■ Surrender the property. | □No |
| name: | Retain the property and redeem it. | _ 110 |
| Description of 370 Norman Lane Roselle, IL | Retain the property and enter into a Reaffirmation Agreement. | ■ Yes |
| property 60172 DuPage County securing debt: | ☐ Retain the property and [explain]: | |
| Creditor's Chase Home Finance | ■ Surrender the property. | □No |
| name: | ☐ Retain the property and redeem it. | _ |
| Description of 370 Norman Lane Roselle, IL | ☐ Retain the property and enter into a Reaffirmation Agreement. | Yes |
| property 60172 DuPage County securing debt: | ☐ Retain the property and [explain]: | |

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will the lease be assumed?

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| Debtor 1 Raymond A. Habel | Case number (if known) |
|--|--|
| Lessor's name: Description of leased | □ No |
| Property: | ☐ Yes |
| Lessor's name: Description of leased | □ No |
| Property: | ☐ Yes |
| Lessor's name: Description of leased | □ No |
| Property: | ☐ Yes |
| Lessor's name: Description of leased | □ No |
| Property: | ☐ Yes |
| Lessor's name: | □ No |
| Description of leased Property: | ☐ Yes |
| Lessor's name: | □ No |
| Description of leased Property: | ☐ Yes |
| Lessor's name: Description of leased | □ No |
| Property: | ☐ Yes |
| Part 3: Sign Below | |
| Under penalty of perjury, I declare that I have indi property that is subject to an unexpired lease. | icated my intention about any property of my estate that secures a debt and any personal |
| X /s/ Raymond A. Habel | x |
| Raymond A. Habel Signature of Debtor 1 | Signature of Debtor 2 |
| Date December 13, 2016 | Date |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-39204 Doc 1 Filed 12/13/16 Entered 12/13/16 15:15:34 Desc Main Document Page 44 of 46

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

| In re | Raymond A. Habel | | Case No. | | |
|----------------|--|---|--|--------------------------|--------------|
| | | Debtor(s) | Chapter | 7 | |
| | DISCLOSURE OF COMPE | NSATION OF ATTOR | NEY FOR DI | EBTOR(S) | |
| | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation | ng of the petition in bankruptcy, o | r agreed to be paid | to me, for services ren | dered or to |
| | | | | 1,600.00 | |
| | Prior to the filing of this statement I have received | | \$ | 1,600.00 | |
| | Balance Due | | \$ | 0.00 | |
| 2. | The source of the compensation paid to me was: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 3. | The source of compensation to be paid to me is: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 4. | ■ I have not agreed to share the above-disclosed comp | pensation with any other person un | nless they are mem | bers and associates of r | my law firm. |
| | ☐ I have agreed to share the above-disclosed compens copy of the agreement, together with a list of the na | sation with a person or persons wh ames of the people sharing in the c | o are not members ompensation is atta | or associates of my lav | w firm. A |
| 5. | In return for the above-disclosed fee, I have agreed to re | ender legal service for all aspects | of the bankruptcy | case, including: | |
| | a. Analysis of the debtor's financial situation, and rende b. Preparation and filing of any petition, schedules, state c. Representation of the debtor at the meeting of credit d. [Other provisions as needed] | tement of affairs and plan which n | nay be required; | | ıptcy; |
| | Negotiations with secured creditors to reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on ho | ons as needed; preparation a | | | |
| 6. | By agreement with the debtor(s), the above-disclosed fe Representation of the debtors in any dis any other adversary proceeding. | ee does not include the following s schargeability actions, judici | ervice: al lien avoidanc | es, relief from stay | actions or |
| | | CERTIFICATION | | | |
| | I certify that the foregoing is a complete statement of an ankruptcy proceeding. | ny agreement or arrangement for p | ayment to me for r | epresentation of the del | btor(s) in |
| D | ecember 13, 2016 | /s/ Gregory J. Mart | ucci | | |
| \overline{L} | ate | Gregory J. Martuce Signature of Attorney | ci 6185842 | | _ |
| | | Law Office of Greg | | P.C. | |
| | | 203 E. Irving Park I | Rd. | | |
| | | Roselle, IL 60172 (630) 980-8333 Fa | x: (630) 980-840 | 4 | |
| | | greg@martuccilaw | | | |
| | | Name of law firm | | | |

United States Bankruptcy Court Northern District of Illinois

| In re | Raymond A. Habel | | Case No. | | | |
|-------|--|---|-----------------------------------|----------|--|--|
| | | Debtor(s) | Chapter 7 | | | |
| | VERIFICATION OF CREDITOR MATRIX | | | | | |
| | | Number of | Creditors: | 9 | | |
| | The above-named Debtor(s) (our) knowledge. | hereby verifies that the list of credit | ors is true and correct to the be | st of my | | |
| Date: | December 13, 2016 | /s/ Raymond A. Habel Raymond A. Habel Signature of Debtor | | | | |

BP Visa P.O. Box 530942 Atlanta, GA 30353

Capital Management Services, LP 698 1/2 South Ogden Street Buffalo, NY 14206

Chase Home Finance Mail Code OH4-7302 P.O. Box 24696 Columbus, OH 43224

Citi Cards Processing Center Des Moines, IA 50363

Commerce Bank P.O. Box 410857 Kansas City, MO 64141

Discover P.O. Box 6103 Carol Stream, IL 60197

Lowes P.O. Box 965005 Orlando, FL 32896

Midland Credit Management, Inc. 8875 Aero Drive, Ste. 200 San Diego, CA 92123

NBC Management Services, Inc. P.O. Box 1099 Langhorne, PA 19047